

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	A-S	943	5-11-1
RESPONSE FORMALITY REVIEW	CL	1109	1-10-02

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) ... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1	✓	✓	12/15/02
2			1/15/03
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37	✓		
38	✓	✓	
39	✓	✓	
40	✓	✓	
41	✓	✓	
42	✓	✓	
43	✓	✓	
44	✓	✓	
45	✓	✓	
46	✓	✓	
47	✓	✓	
48	✓	✓	
49	✓	✓	
50	o	o	

Claim	Final	Original	Date
51	o	✓	12/15/02
52	✓	✓	1/15/03
53	✓	✓	
54	✓	✓	
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56	✓	✓	
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
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